

While ill. he needs  
also the option



While as hospitals tend to judge themselves on formal levels such as number of beds, specialists, equipment, and size of budget and so on; the patient is not interested in such statistical aggregates. Once in a hospital, he seeks satisfaction for his very special and private psychological and emotional needs. A patient has needs for privacy of person at least when he is not critically ill.

He needs also the option of sociability when he is fit to socialise within the hospital. He has the need to be informed in general about his illness and progress. He needs freedom from pain when it occurs. He needs at least to be informed about the planning of his care. He has the need to be assured that he will not be abandoned at a time of crisis. The patient also needs to have confidence that people caring for him not only are good in their job but also know his special requirements. And he needs to feel the presence of the reassuring nurse who cares about what happens to him. Depending on its image, a hospital is variously considered as a crisis place, a curing place or a trauma place.

As a place, Canter Considers the nature of the hospital as resultant of the interaction of three major influences as under, and suggests that each of these should be constructively modified if we seek to humanize the hospital:

- i. The physical setting, ii. The activities which take place within, and iii. The conceptions held by users.

Even when the hospital is not dependent for its continued existence on the financial support of the community, it cannot properly fulfill its role unless it can win and maintain the confidence of the public which it is there to serve. Hospital administration must ensure that the

hospital is serving the purpose for which it is created and is meeting the needs of those it serves.

To meet this aim, all those concerned with the hospital have to make a conscious effort to project the correct image of the hospital. This effort on the part of a hospital is nothing else but the essence of public relations in practice. Public is becoming more and more conscious of their rights and privileges and are expecting a higher standard of service. They cannot evaluate the professional quality of care, but they do evaluate the food, linen and housekeeping services and behaviour of the staff. They are generally grateful to the attending physician, but they may not be so grateful to the hospital for the bed, board and other services.

It is the public for whom the hospital exists. Therefore, public relations have to stem from the involvement of every single individual working for the hospital, as every action by every such person is an act towards public relations. There is a need to dispel from the minds of the physicians working in a hospital the notion that public relations are the task of the administrator alone. The image of the hospital reflects through the behaviour of every member of the staff. A battery of health professionals have frequently to interrupt the patient's privacy and, so to say, trespass into his or her territory often without knocking or announcing. Members of the medical team often carry out activities without introduction. And then they depart without any explanation as to what they have done.

In some hospitals, the patient seems to get a distinct impression of being the trespasser on the territory of the medical team than the other way round.

Good publicity by itself is not the only part of public relation although an essential part of it. An understanding of the consumer's needs, and sympathetic services, is the crux of public relations in a hospital.